


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 20 AM 8:33

DOCUMENT # A04000001774 1. Entity Name T.S. MURPHY HOLDINGS LIMITED PARTNERSHIP					
Principal Place of Business 1313 W. MIDWAY ROAD FT. PIERCE, FL 34912			Mailing Address 1313 W. MIDWAY ROAD FT. PIERCE, FL 34912		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01142005 Chg-LP CR2E003 (10/03)	
Zip 34982 Country		Zip 34982 Country		4. FEI Number 20-0544316	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MURPHY, TRAVIS E JR. 1313 W. MIDWAY ROAD FT. PIERCE, FL 34912			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code 34982 </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Travis E. Murphy, Jr.</u> Travis E. Murphy, Jr. - Pres. of GP 1-18-05 <small>Signature, typed or printed name of registered agent and title, if applicable. DATE</small>					
9. Capital Contributions as Shown on record. \$1,250,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # G35891 NAME RIVER COUNTRY MANAGEMENT, INC. STREET ADDRESS 1313 W. MIDWAY ROAD CITY-ST-ZIP FT. PIERCE, FL 34912			STREET ADDRESS CITY-ST-ZIP FT. PIERCE, FL 34982		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: <u>Travis E. Murphy, Jr.</u> Travis E. Murphy, Jr. 1-18-05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #</small>					

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